

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO.	FILING DATE				
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT						
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP
1	1		1				51				
2		1		1			52				
3		1		1			53				
4		1		1			54				
5		1		1			55				
6		2		2			56				
7		2		2			57				
8		2		2			58				
9		1		1			59				
10		1		1			60				
11		1		1			61				
12		2		2			62				
13		2		2			63				
14		2		2			64				
15	1		1				65				
16		1		1			66				
17		1		1			67				
18	1		1				68				
19		1		1			69				
20		1		1			70				
21		1		1			71				
22	1		1				72				
23							73				
24							74				
25							75				
26							76				
27							77				
28							78				
29							79				
30							80				
31							81				
32							82				
33							83				
34							84				
35							85				
36							86				
37							87				
38							88				
39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	4		4				TOTAL IND.				
TOTAL DEP.	24		24				TOTAL DEP.				
TOTAL CLAIMS	28		28				TOTAL CLAIMS				